

# SUPPLEMENTAL APPLICATION QUESTIONNAIRE TRANSPORTATION SURVEYOR (CALTRANS) EXAMINATION

⇒DO NOT REMOVE THIS COVER SHEET FROM BOOKLET (=

Thank you, for your interest in employment with the Department of Water Resources (DWR). The DWR Transportation Surveyor (Caltrans) examination consists solely of a self-assessment Supplemental Application Questionnaire.

The self-assessment Supplemental Application Questionnaire is designed to elicit a range of specific information regarding each candidate's education, knowledge, abilities, experiences, and potential to effectively perform the duties relative to the classification. Please be sure to read the "Instructions to Candidates" carefully before beginning to fill out the application. Candidates **must** complete **all sections**.

The information you provide determines your rank and score on the eligible list.

Candidates who misrepresent their knowledge, education, abilities, or experience, which are subject to verification, will result in adverse consequences that could include the following:

- removal from the exam process;
- · removal from the certification list;
- loss of State employment; and/or,
- loss of the right to compete in any future examinations.

You cannot submit these documents electronically. Your completed Supplemental Application Questionnaire and your completed Examination Application (Form STD 678 Rev. 10/2013) <u>must</u> be postmarked or delivered in person by the cut-off dates of February 4 or August 4 to:

## **MAILING ADDRESS:**

Department of Water Resources P.O. Box 942836 Sacramento, CA 94236-0001

# **SUBMIT IN PERSON:**

Department of Water Resources 1416 9<sup>th</sup> Street, Room 320 Sacramento, CA 95814

If you do not submit **both** the Supplemental Application Questionnaire **and** the Examination Application to the above address, by the cut-off-dates listed above, you will be eliminated from the examination.

If your Supplemental Application Questionnaire **and** your Examination Application are not received at the above address, by the cut-off dates listed above, they will be held for the next administration.

If you are successful in the examination, your name will be placed on the eligible list for a period of 12 months. During this period, you may apply for openings and be considered for employment opportunities with the Department of Water Resources. Your Supplemental Application Questionnaire may be made available to hiring supervisors for review when vacancies occur.

If you have any questions regarding the Transportation Surveyor (Caltrans) examination, please contact Claire Chung at (916) 653-3910.

Good luck.

# ⇒ INSTRUCTIONS TO CANDIDATES ←

Candidates competing in the Transportation Surveyor (CalTrans) examination are required to read and complete the following:

- Pages 1 through 6, which include; the Conditions of Employment, the Statement of Understanding for Candidates, and the Supplemental Application Questionnaire
- Examination Application (Form STD 678 Rev. 10/2013)

Submit all the above documents by mail or in person to the Department of Water Resources to the address listed on the previous page by the cut-off dates of February 4 or August 4.

• When evaluating work experience (paid and/or voluntary), all part-time experience must be converted to full-time equivalency.

EXAMPLE: Employment for six months on a half-time basis equals three months of full-time employment. Full-time employment is defined as 40 hours per week.

- Fill out the questionnaire neatly and legibly.
- Be sure your sentences are clear and understandable.
- Provide your responses on the questionnaire <u>only</u>. Use the space provided. **Do not** attach a resume, additional pages or other materials. **Do not** write on the back of pages. Attachments will <u>not</u> be evaluated.
- **Do not** alter the form in any way to give yourself additional space. Altered forms or responses will <u>not</u> be evaluated.
- <u>Check only one box for each question.</u> If two boxes are checked, you will not receive a score for that item.
- When requested, include descriptions of experience. If your descriptions are not included or are inconsistent with the question being asked, you will not receive a score for that item. No assumptions will be made.
- Be sure your envelope has adequate postage.
- Make a photocopy for your records.

FACSIMILES (FAX) WILL <u>NOT</u> BE ACCEPTED UNDER ANY CIRCUMSTANCES

# **CONDITIONS OF EMPLOYMENT**

Complete this form and submit it with your Supplemental Application Questionnaire.

Please notify the Department of Water Resources <u>promptly</u> of any change in availability for employment or if you have a change of address.

NAME:
PLEASE CHECK YOUR CHOICE(S). You will not be contacted for employment in locations that are not checked.
STATEWIDE - (If checked, no further selection is necessary) OR
TEHAMA COUNTY
SACRAMENTO COUNTY
KERN COUNTY
MERCED COUNTY
CHANGE OF ADDRESS
IF YOUR ADDRESS HAS CHANGED, PLEASE INDICATE YOUR NEW ADDRESS:
Address: Home Phone # ()
City:       State:       Apt #:       Zip Code:       Work Phone # ()

### STATEMENT OF UNDERSTANDING FOR CANDIDATES

Government Code Section 19680 through 19682 requires all State civil service examinations to be confidential and impartial and provides legal remedies to be taken against impairing the fairness of the testing procedure. Discussing or giving information to other competitors or interested persons about the questions or procedures of the oral examining panel is a violation of these standards. Such violation may result in cancellation of the eligibility of any competitor or of the entire examination. It can also result in legal actions against any person who violates or breaches exam security.

Section 19681. It is unlawful for any person:

(b) To obtain examination questions or other examination material except by specific authorization either **before**, **during**, **or after** an examination or use or purport to use any such examination questions or materials for the purpose of instructing or coaching or preparing candidates for examinations.

#### Section 19682.

Every person who violates any provision of this chapter is guilty of a misdemeanor. In accordance with Section 19683, action may be taken by the appointing power, or the executive office of the board may file charges, against a state employee who violates any provisions of this chapter.

I have read and understand the information given above. I also understand that I am fully responsible for reading and comprehending all the information and instructions provided in this Supplemental Application Questionnaire. Furthermore, I understand that if this Supplemental Application Questionnaire is not completed correctly, it will not be processed, and will result in an automatic disqualification from this examination process.

PRINTED NAME:		_	
SIGNATURE:		DATE	
<u>.</u>	EDUCATION		
I. INDICATE DEGREE(S) OBTAINED FROM AN ACCREDITED COLLEGE/UNIVERSITY:			
Associate's degree	Major:		
Completed	Graduation Date:		
	Obtained at:		
Bachelor's degree	Major:		
Completed	Graduation Date:		
	Obtained at:		
Master's degree	Major:		
Completed	Graduation Date:		
	Obtained at:		

# II. INDICATE THE LENGTH OF TIME AND BRIEFLY DESCRIBE YOUR WORK EXPERIENCE ON QUESTIONS 1 - 15:

	<ol> <li>Researching and compiling evidence and documentation for boundary determination</li> </ol>				
		None	☐Less than 2 years	☐2-5 years	☐More than 5 years
Ple	ase	e describe (ir	nclude at least one example	e):	
	2.	Interpreting	legal descriptions of real p	roperty	
		None	Less than 2 years	☐2-5 years	☐More than 5 years
Ple	ase	describe (ir	nclude at least one example	e):	
2		Making pro		using conventional	and state of the out equipment
3.	<b>□</b> 1	Waking pred None	Less than 2 years	_	and state-of-the-art equipment  More than 5 years
Plea			•		
		`	•		
4. Writing property descriptions and preparing legal land documents and descriptions					
		None	Less than 2 years	☐2-5 years	More than 5 years
Ple	Please describe (include at least one example):				

	g and utilizing the principles	of the Camorna	State Plane Coordinate System
□None	Less than 2 years	☐2-5 years	☐More than 5 years
Please describe	e (include at least one exam	ple):	
6. Researce		and knowledge o	of factors involved in determining owner
□None	Less than 2 years	☐2-5 years	☐More than 5 years
Please describe	e (include at least one exam	ple):	
7. Working	knowledge of the Land Sur	veyor's Act	
□None	Less than 2 years	☐2-5 years	☐More than 5 years
Please describe	e (include at least one exam	ple):	
8. Right of	Way engineering as it perta	ins to land surve	ying and property acquisitions
□None	Less than 2 years	☐2-5 years	☐More than 5 years
Please describe	e (include at least one exam	ple):	

9. Surveyin	g mapping and drafting usi	ing computer appl	lications
□None	Less than 2 years	☐2-5 years	☐More than 5 years
Please describe	e (include at least one exam	nple):	
10. Working	with laws and codes of saf	e surveying practi	ices
□None	Less than 2 years	☐2-5 years	☐More than 5 years
Please describe	e (include at least one exam	nple):	
11. Perform	ing boundary determination	n of real property	using proper principles and practices
□None	Less than 2 years	□2-5 years	☐More than 5 years
Please describe	e (include at least one exam	nple):	
12. Working	ı with photogrammetric ma	pping procedures	including flight planning
□None	Less than 2 years	☐2-5 years	☐More than 5 years
Please describe	e (include at least one exam	nple):	

13. Checking	g, adjusting, and utilizing s	urvey data					
□None	Less than 2 years	☐2-5 years	☐More than 5 years				
Please describe	Please describe (include at least one example):						
14. Performi	14. Performing fundamental surveying calculations						
□None	Less than 2 years	☐2-5 years	☐More than 5 years				
Please describe	Please describe (include at least one example):						
15. Working	15. Working on a field survey crew						
□None	Less than 2 years	□2-5 years	☐More than 5 years				
Please describe	Please describe (include at least one example):						

THIS CONCLUDES THE EXAMINATION.
RESULTS WILL BE MAILED IN APPROXIMATELY
4-6 WEEKS.